

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS    | ID NO.      | DATE            |
|---------------------------|-------------|-------------|-----------------|
| FEE DETERMINATION         | <i>W.A.</i> |             | <i>11/26/01</i> |
| O.I.P.E. CLASSIFIER       |             | <i>48</i>   | <i>12/1/01</i>  |
| FORMALITY REVIEW          | <i>H.T.</i> | <i>1117</i> | <i>12/04/01</i> |
| RESPONSE FORMALITY REVIEW |             |             |                 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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XC 533 NK 12/5/01